

Medicare Reimbursement Rates for Indiana BCCP Screening and Diagnostic Services

As of March 1, 2003

CPT Code	Service Description	Allowable Rate
Office Visit		
99201	New Patient (new to clinic), problem focused exam, (10 minutes) Use: Either CBE or Pelvic exam only	\$32.87
99202	New Patient (new to clinic), expanded problem focused exam, (20 minutes) Use: Both CBE and Pelvic	\$58.76
99212	Established Patient, problem focused exam, (10 minutes) Use: Either CBE or Pelvic exam only	\$34.23
99213	Established Patient, expanded problem focused exam, (15 minutes) Use: Both CBE and Pelvic exam	\$48.11
Preventive Visit Code	The following preventive visit codes will be accepted: 99385; 99386; 99387; 99395; 99396; and 99397. Since Medicare does not establish a rate for these codes, they will be translated by our system into allowable codes. Codes 99385 through 99387 will become code 99202 and reimbursed at the maximum rate for that code. Codes 99395 through 99397 will become 99213 and reimbursed at that rate	
Pap Smear		
88164	Screening and Diagnostic Pap Smear	\$14.76
88141	Pap Smear, Requiring Interpretation by Physician	\$21.78
87621	*HPV Testing	\$50.67
88142	Thin Prep Pap Smear	\$14.76
Colposcopy & Associated Pathology		
57452	*Colposcopy - Without Biopsy (Note: 99212 visit may be billed)	\$113.56
57454	*Colposcopy - With Biopsy (Note: 99212 visit may be billed)	\$155.91
88305	Surgical Pathology (Cervical Biopsy Reading)	\$87.98
88305-26	Surgical Pathology (Cervical Biopsy Reading), prof. charge	\$38.95
88305-TC	Surgical Pathology (Cervical Biopsy Reading), technical charge	\$49.03

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CPT Code	Service Description	Allowable Rate
Mammography		
76092	Screening Mammogram, Global	\$76.37
76092-26	Screening Mammogram, professional component	\$34.27
76092-TC	Screening Mammogram, technical component	\$42.10
76090	*Diagnostic Mammogram, (Unilateral), Global	\$70.09
76090-26	*Diagnostic Mammogram, (Unilateral), professional component	\$33.93
76090-TC	*Diagnostic Mammogram, (Unilateral), technical component	\$36.16
76091	*Diagnostic Mammogram, (Bilateral) Global	\$87.25
76091-26	*Diagnostic Mammogram, (Bilateral), professional component	\$42.10
76091-TC	*Diagnostic Mammogram, (Bilateral), technical component	\$45.15
Breast Ultrasound		
76645	*Breast Ultrasound, Unilateral, global	\$62.28
76645-26	*Breast Ultrasound, Unilateral, professional component	\$26.12
76645-TC	*Breast Ultrasound, Unilateral, technical component	\$36.16
Fine Needle Aspiration & Associated Cytology		
10021	*Fine Needle Aspiration done in pathology laboratory, global	\$127.45
88172	Evaluation of Fine Needle Aspirate, global	\$45.76
88172-26	Evaluation of Fine Needle Aspirate, professional component	\$31.16
88172-TC	Evaluation of Fine Needle Aspirate, technical component	\$14.60

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CPT Code	Service Description	Allowable Rate
Fine Needle Aspiration & Associated Cytology (continued)		
88173	Interpretation and Report of FNA by cytopathology, global	\$113.47
88173-26	Interpretation/Report of FNA by cytopathology, professional Charge	\$72.07
88173-TC	Interpretation/Report of FNA by cytopathology, technical Component	\$41.39
19000	*Aspiration of Cyst	\$72.25
19001	*Aspiration of Each Additional Cyst	\$43.50
Breast Biopsy & Associated Cytology		
76095	*Stereotactic localization for breast biopsy, each lesion, radiological supervision and interpretation, global	\$324.59
76095-26	*Stereotactic localization for breast biopsy, each lesion, radiological supervision and interpretation, professional charge	\$77.29
76095-TC	*Stereotactic localization for breast biopsy, each lesion, radiological supervision and interpretation, technical charge	\$247.31
76096	*Preoperative placement of needle localization wire, breast, radiological supervision and interpretation, global	\$72.34
76096-26	*Preoperative placement of needle localization wire, breast, radiological supervision and interpretation, professional charge	\$27.18
76096-TC	*Preoperative placement of needle localization wire, breast, radiological supervision and interpretation, technical charge	\$45.15
76098	Radiological examination, surgical specimen, global	\$22.58
76098-26	Radiological examination, surgical specimen, professional charge	\$7.99
76098-TC	Radiological examination, surgical specimen, technical charge	\$14.60

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Breast Biopsy & Associated Cytology (continued)		
76942	*Ultrasonic guidance for needle biopsy, radiological supervision and interpretation, global	\$134.16
76942-26	*Ultrasonic guidance for needle biopsy, radiological supervision and interpretation, professional charge	\$32.69
76942-TC	*Ultrasonic guidance for needle biopsy, radiological supervision and interpretation, technical charge	\$101.47
19100	*Biopsy of breast, needle core (surgical procedure only)	\$96.10
19101	*Incisional biopsy of breast	\$288.55
19102	*Percutaneous Needle Core, using image guidance	\$239.31
19103	*Percutaneous Automated Vacuum Assisted or Rotating Biopsy Device, using imaging guidance	\$553.86
19120	*Excision of cyst, fibroadenoma, or other benign or malignant tumor aberrant breast tissue, duct lesion or nipple lesion	\$377.42
19125	*Excision of breast lesion identified by pre-operative placement of radiological marker-single lesion	\$400.76
19126	*Excision of breast lesion identified by pre-operative placement of radiological marker-each additional lesion	\$145.64
19290	*Preoperative placement of needle localization wire breast	\$144.91
19295	*Placement of percutaneous localization clip	\$90.06
88305	Breast biopsy interpretation, global	\$87.98
88305-26	Breast biopsy interpretation, professional charge	\$38.95
88305-TC	Breast biopsy interpretation, technical charge	\$49.03
Problem Focused Office Consultation (Use only to discuss abnormal results and concomitant medical plans with a patient.)		
99241	Problem focused consultation, with problem focused examination (15 minutes)	\$44.49
99242	Expanded problem focused office consultation, with expanded problem focused examination (30 minutes)	\$82.74
99243	Detailed problem focused office consultation, with detailed problem focused examination (40 minutes)	\$109.63

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